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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Robert J. Panek, Jr. : Art Unit: 3727
 Serial No.: 09/845,976 : Examiner: S. Castellano
 Filed: April 30, 2001 :
 FOR: MEDICAL WASTE :
 DISPOSAL SYSTEM :

RESPONSE TO OFFICE ACTION
DATED SEPTEMBER 13, 2001

Assistant Commissioner for Patents
 Washington, D.C. 20231

SIR:

Responsive to the Office Action dated September 13, 2001, please amend the above-identified application as follows:

IN THE CLAIMS:

Kindly amend claims 1, 2 and 12 and add new claim 21 as follows.

-
- 1 1. (Amended) A carrier configured to hold a container having a
 2 door mounted for reciprocation between opened and closed positions, said carrier
 3 comprising:
 4 a mobile body adapted to receive the container; and
 5 an extension coupled to said body for reciprocal movement with
 6 respect to said body, said extension being adapted for engagement with the door of
 7 the container, and said reciprocal movement of said extension being adapted to
 8 reciprocate the door of the container between the opened and closed positions.

In re application of: Robert J. Panek
 Serial No.: 09/845,976
 Filed: April 30, 2001
 For: MEDICAL WASTE DISPOSAL SYSTEM

ASSISTANT COMMISSIONER FOR PATENTS
 Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application

- Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)
Total	* 21	Minus	**20
Indep	* 3	Minus	***2
<input type="checkbox"/> First Presentation of Multiple Dependent Claim			

SMALL ENTITY		OTHER THAN A SMALL ENTITY	
OR	Rate	OR	Rate
x \$ 9	\$	x \$ 18	\$18.00
x \$ 42	\$	x \$ 84	\$
+\$140	\$	+\$280	\$
TOTAL ADDIT. FEE		TOTAL	
	\$		18.00

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 18-0350 the amount of \$_____. A duplicate copy of this sheet is enclosed.
- A check in the amount of \$18.00 is enclosed.
- The Assistant Commissioner for Patents is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 18-0350. A duplicate copy of this sheet is enclosed.
- Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- Any patent application processing fees under 37 CFR 1.17.

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Respectfully submitted,

Joshua L. Cohen

Joshua L. Cohen, Reg. No. 38,040

CERTIFICATE OF MAILING (37 CFR 1.8a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Assistant Commissioner for Patents, Washington, D.C. 20231.

Date: 01/14/02

Joshua L. Cohen
 Joshua L. Cohen
 Attorney for Applicants